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## BIB DATA SHEET

CONFIRMATION NO. 7340

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/591,124    | 10/03/2006                       | 514   | 4118           | 27617U                 |

**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/IL2005/000255 03/03/2005  
 which claims benefit of 60/549,530 03/04/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***  
 03/23/2008

|  |   |  |                             |                            |                         |                               |
|--|---|--|-----------------------------|----------------------------|-------------------------|-------------------------------|
| Foreign Priority claimed<br>35 USC 119(a-d) conditions met   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | <b>STATE OR<br/>COUNTRY</b> | <b>SHEETS<br/>DRAWINGS</b> | <b>TOTAL<br/>CLAIMS</b> | <b>INDEPENDENT<br/>CLAIMS</b> |
| Verified and<br>JOSEPH G<br>JOHNNIE/<br>Examiner's signature |   | Initials                                     | ISRAEL                      | 3                          | 24                      | 3                             |

**ADDRESS**  
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**TITLE**  
 Safe Device for Iontophoretic Delivery of Drugs

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>615 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                                       |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                                       |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                                       |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|                                       |   | <input type="checkbox"/> Other _____                         |
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